

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>CHANGE OF CORRESPONDENCE ADDRESS Application</b>  Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/701,267-Conf. #5008
	Filing Date	November 4, 2003
	First Named Inventor	Soleyman KAHEN
	Art Unit	3617
	Examiner Name	J. R. Bellinger
	Attorney Docket No.	L8400-01005P

Please change the Correspondence Address for the above-identified application to:

☒ The address associated with Customer Number: 
**OR**

<input type="checkbox"/> Firm or Individual Name					
Address					
City		State		Zip	
Country					
Telephone			Email		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- ☐ Applicant/Inventor  
☐ Assignee of record of the entire interest.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
☒ Attorney or agent of record. Registration Number 20,379.  
☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_.

Signature /Thomas M. Small/Typed or Printed Name Thomas M. SmallDate July 12, 2006Telephone (714) 708-8555

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.